PTO/SB/01 (12-97) Approved for use through 9/30/00.OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DI	DESIGN		Attorney Docket Number	20628-707	
			First Named Inventor	Todd J. Gable	
PATENT APPLICATION			COMPLE	TE IF KNOWN	
_	(37 CFR 1.63)		Application Number	Not Yet Assigned	
$\boxtimes$	Declaration [Submitted OR	Declaration Submitted after Initial	Filing Date	Herewith	-
	with Initial Filing	Filing (surcharge (37 CFR 1.16(e))	Group Art Unit	Not Yet Assigned	
	-	required)	Examiner Name	Not Yet Assigned	

As a below named Inventor, I here	y declare	e that:				
My residence, post office address,	and citize	enship are as stated bel	ow next to my n	ame.		
I believe I am the original, first and names are listed below) of the subj	sole inve	entor (if only one name r which is claimed and	is listed below) for which a pate	or an original nt is sought on	, first and joint in the invention en	ventor (if plural titled:
METHOD AN	D APP	ARATUS FOR	SPEECH (	CHARACT	TERIZATI(	ON
		(Title of the	Invention)	•		
the specification of which ⊠ is attached hereto OR		(ville ev live)	vonuon,			
was filed on (MM/DD/YYYY	)		as United	States Applica	ation Number or	PCT International
Application Number and was ar	nended o	n (MM/DD/YYYY)	(if applicable).			
I hereby state that I have reviewed amended by any amendment specific	and und	derstand the contents	of the above in	dentified speci	ification, includin	g the claims, as
I acknowledge the duty to disclose in			entability as def	ined in 37 CFF	R 1.56.	
I hereby claim foreign priority benef certificate, or 365(a) of any PCT in America, listed below and have also or of any PCT international applicatio	ernationa identified	il application which de below by checking the	signated at leas	st one country	other than the	United Ctatas of
Prior Foreign Application Number(s) Cou	ntny	Foreign Filing Date (MM/DD/YYYY)	Prio		Certified Co	py Attached?
rvariber(s)	iiti y	(IVIIVI/DD/TTTT)	Not Cla	aimed	YES	NO
				]		
				]		
				)		
Additional foreign application num	bers are l	isted on a supplementa	al priority data sh	neet PTO/SB/0	28 attached here	eto:
I hereby claim the benefit under 35 U.  Application Number(s)	S.C. 119(	h) of any United States	provisional app	lication(s) liste	d below.	
The state of the s	<del>-</del>	Filing Date (MM/DD	/YYYY)			
60/252,305		11/21/2000		numb suppl	onal provisional a ers are listed on emental priority o SB/028 attached	a lata sheet

(Page 1 of 2)
Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of the application is not designated in the prior United States or PCT international application in the manner provided by the first paragraph of 31 U.S.C. 112. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available

between the filing of	date of t	he prior application	on and the	e nation	al or PCT	⊤inte	ernational	filin	ig date	of this	applicati	on.			
U.S. Pare	nt App	olication or PC	T Parent	t Numl	ber				Filing	g Date YYY)	P			tent Numbe olicable)	∍r
							·								
Additional U.S.	or PCT	international appli	cation num	nbers are	e listed or	n a si	upplement	al pr	riority o	lata she	et PTO/S	B/028	atta	ched hereto.	
As a named inventor Patent and Tradema			with: 🔯	Custon OR Regist	ner Numb ered prac	er [	to prosect 21971 ter(s) name		<u> </u>		-	•	Pi Ni Co	lace Customer umber Bar ode Label here	пе
N	lame			gistrati lumber					Name	•				gistration Number	
Additional regis	tered pra	actitioner(s) named	l on supple	emental	Registere	ed Pr	actitioner l	Info	rmatio	n sheet F	PTO/SB/	02C at	tache	ed hereto.	
Direct all correspo	ondence		er Numbe Code Labe			219	971	7	(	DR 🔲 (	Corresp	onden	ce a	ddress below	1
Name	Barba	ra B. Courtney													
Address	Wilso	n Sonsini Goodric	h & Rosa	ati											
Address	650 P	age Mill Road										~			
City	Palo A	Alto	<del></del>		· r · · · · · · · · · · · · · · · · · ·	S	State	C	A	ZIP	94304				
Country	U.S.		Teleph		650-49					Fax	650-49				
I hereby declare the believed to be true; punishable by fine application or any p	and fur	ther that these sta conment, or both,	atements v	were ma	de with t	he kr	nowledge	that	willful	false sta	atements	and t	he li	ke so made a	are
Name of Sole	or Fir	st Inventor:			A	A pet	ition has	be	en file	d for th	is unsig	ned i	nvei	ntor	
Giver	Name	(first and middle	e (if any)						Fami	ly Name	e or Sur	name	)		
		Todd J.								Ga	ble				
inventor's Signat	ure	1/1	/_		Mr. tartina et a et						Dat	е	6/	5/01	
Residence: City		Walnut Creek	Stat	e C	California	a	Country		ι	ISA	Citize	enshi	<b>o</b>	USA	
Post Office Addre	ess	2204 La Salle	Drive												
Post Office Addre	ess							·					-		
City		Walnut Creek	Stat	l	California		ZIP			598	Cour			USA	
	entors ar	e being named o	n the <u>1 (C</u>	One) sup	oplement	al Ac	dditional I	nve	ntor(s)	sheet(s	) PTO/S	B/02/	\ atta	ached hereto:	:

PTO/SB/02A (3-97) Approved for use through 9/30/98,OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## **DECLARATION**

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 1

Name of Additional Joint Inventor, if any:			A petition has been filed for this unsigned inventor									
Given Name (first and middle (if any)				Family Name or Surname								
L	_awrence C.					N	9					
Inventor's Signature							Date					
Residence: City	Danville	State	Califo	rnia	Country	USA	Citizensh	ip	USA			
Post Office Address	80 Country Hills Court											
Post Office Address					~		,					
City	Danville	State	Califo	rnia	ZIP	94506	Country		USA			
Name of Additional	Joint Inventor,	if any:	A petition has been filed for this unsigned inventor									
Given Name	(first and middle (if	any)		Family Name or Surname								
	John F.			Holzrichter								
Inventor's Signature		·										
City	Berkeley	State	Califo	rnia	Country	USA	Citizenship USA					
Post Office Address	200 Hillcrest Roa	d										
Post Office Address												
City	Berkeley	State	Califo	rnia	ZIP	94705	Country		USA			
Name of Additional	Joint Inventor,	if any:	A petition has been filed for this unsigned inventor									
Given Name	(first and middle (it	f any)				Family Name	or Surnan	ne				
	Greg C.					Bur	nett					
Inventor's Signature						···	Date		<del></del>			
City	Livermore	State	Califo	rnia	Country	USA	Citizensi	nip	USA			
Post Office Address	637 South H Stre	et										
Post Office Address												
City	Livermore	State	Califo	ornia	ZIP	94550	Country		USA			

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

Approved for use through 9/30/00.OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## **DECLARATION FOR UTILITY OR DESIGN** PATENT APPLICATION (37 CFR 1.63)

 $\boxtimes$ Declaration Submitted with Initial Filing

OR

Declaration Submitted after Initial Filing (surcharge (37 ČFR 1.16(e)) required)

Attorney Docket Number	20628-707	
First Named Inventor	Todd J. Gable	
COMPLE	TE IF KNOWN	
Application Number	Not Yet Assigned	
Filing Date	Herewith	
Group Art Unit	Not Yet Assigned	
Examiner Name	Not Yet Assigned	,

As a below named I	nventor, I hereby	declare	that:				
My residence, post	office address, a	d citize	nship are as stated belo	ow next to my na	ame.		
I believe I am the o names are listed be	iginal, first and s ow) of the subjec	ole inve t matter	entor (if only one name which is claimed and f	is listed below) or which a pater	or an original it is sought on	, first and joint inv the invention enti	entor (if plural tled:
ME	THOD AND	APP	ARATUS FOR	SPEECH C	HARACT	ΓERIZATIO	N
the specification of to is attached OR			(Title of the I	nvention)			
was filed on	(MM/DD/YYYY)			as United	States Applica	ation Number or P	CT International
Application Number	and was ame	nded or	n (MM/DD/YYYY)	(if applicable).			
amended by any ame	ndment specifica	ly referr	lerstand the contents ed to above. which is material to pat				the claims, as
certificate, or 365(a) America, listed below or of any PCT internat	of any PCT inte and have also ic onal application	nationa entified	35 U.S.C. 119(a)-(d) of a application which desired below, by checking the a filing date before that	signated at lease box, any foreig of the applicatio	it one country in application n on which pri	other than the left or the total or inverse or the thick of the thick	United States of ntor's certificate,
Prior Foreign Applicat Number(s)	on Coun	:ry	Foreign Filing Date (MM/DD/YYYY)	Prio Not Cla		Certified Cop YES	by Attached? NO
			isted on a supplementa				to:
		.C. 119(	h) of any United States		lication(s) liste	ed below.	
Application N 60/252			Filing Date (MM/DD 11/21/2000	/YYYY)	numb supp	ional provisional a pers are listed on a emental priority d SB/028 attached	a ata sheet

(Page 1 of 2)

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## **DECLARATION** — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of the application is not designated in the prior United States or PCT international application in the manner provided by the first paragraph of 31 U.S.C. 112.

between the filing							nternatio	nal fili	ng date o	of this a	pplication	).	
U.S. Pare	nt App	olication or PC	T Par	ent Nu	ımber		P		t Filing 'DD/YY\		Par		atent Number oplicable)
Additional U.S. As a named inventor	or, I here		llowing	register	red practit	ioner(s	s) to pros	secute				nsact a	
				OR ☐ Re	gistered p	ractitio	oner(s) n	ame/re	egistration	numb	er listed be		Code Label here
N	lame			Registi Num	ration				Name				egistration Number
Additional regist	tered pra	actitioner(s) name	d on su	ppleme	ntal Regis	tered I	Practition	er Info	ormation s	heet P	TO/SB/02	C attach	ned hereto.
Direct all correspo	ondence		ner Nun Code L			2	1971		) OF		Correspon	dence	address below
Name	Barba	ra B. Courtney											
Address	Wilso	n Sonsini Goodri	ch & R	osati	. ,								
Address	650 P	age Mill Road					т	***	<del></del>				
City	Palo A	Alto					State	C	A 2	ZIP	94304		
Country	U.S.			phone		-493-9		1.0		ax	650-493-		
I hereby declare that believed to be true; punishable by fine of application or any page.	and fur	ther that these st sonment, or both,	atemen	ts were	made wit	h the	knowled	ge tha	t willful fa	ise sta	tements a	nd the	like so made are
Name of Sole	or Fir	st Inventor:				Αp	etition h	as be	en filed	for thi	s unsign	ed inve	entor
Given	Name	(first and middl	e (if an	y)					Family	Name	or Surna	me	
	- · · · · ·	Todd J.								Gal	ble		
Inventor's Signat	ure										Date		
Residence: City	Residence: City Walnut Creek State California Country USA Citizenship USA								USA				
Post Office Addre	Post Office Address 2204 La Salle Drive												
Post Office Addre	ess												
City		Walnut Creek	s	tate	Califor	rnia	ZIP		9459	8	Countr	у	USA
	ntors ar	re being named o	n the 1	(One)	suppleme	ental A	Additiona	al Inve	entor(s) s	heet(s)	PTO/SB/	02A at	tached hereto:

PTO/SB/02A (3-97)

Approved for use through 9/30/98,OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## **DECLARATION**

**ADDITIONAL INVENTOR(S)** Supplemental Sheet Page \_1 of \_1

Name of Additional Joint Inventor, if any:				A petition has been filed for this unsigned inventor								
Given Name	(first and middle (i	f any)	-	Family Name or Surname								
	Lawrence C.					N	lg					
Inventor's Signature							Date		7			
Residence: City	Danville	State	Califo	rnia	Country	USA	Citizenshi	USA				
Post Office Address	80 Country Hills	80 Country Hills Court										
Post Office Address												
City	Danville	State	Califo	rnia	ZIP	94506	Country		USA			
Name of Additional		A petition has been filed for this unsigned inventor										
Given Name	(first and middle (if	f any)		Family Name or Surname								
John F.				Holzrichter								
Inventor's Signature		·•										
City	Berkeley	State	Califo	rnia	Country	USA	Citizenship USA					
Post Office Address	200 Hillcrest Roa	d										
Post Office Address												
City	Berkeley	State	Califo	rnia	ZIP	94705	Country		USA			
Name of Additional	Joint Inventor,	if any:	☐ A petition has been filed for this unsigned inventor									
Given Name	(first and middle (if	fany)				Family Name	or Surname	)				
	Greg C.			Burnett								
Inventor's Signature	6-,			-		Date	6,	14/01				
City	Livermore State California Country USA Ci						Citizenshi	р	USA			
Post Office Address	South H Stree	et 🤆	75		5. 14	St.						
Post Office Address		· · · · · · · · · · · · · · · · · · ·										
City	Livermore	State	Califo	rnia	ZIP	94550	Country	USA				

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.